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### PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 1530 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 1) (Column 2) **SMALL ENTITY** TYPE [ OR **FOR** NUMBER FILED **NUMBER EXTRA** RATE FEE RATE FEE **BASIC FEE** 345.00 690.00 OR **TOTAL CLAIMS** minus 20= X\$ 9= X\$18= 90 OR INDEPENDENT CLAIMS minus 3 = X39= X78= 15% OR MULTIPLE DEPENDENT CLAIM PRESENT +130= +260= OR \* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR CLAIMS AS AMENDED - PART II **OTHER THAN SMALL ENTITY** SMALL ENTITY OR (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL TIONAL RATE RATE **PREVIOUSLY AMENDMENT AFTER EXTRA FEE** FEE AMENDMENT PAID FOR Total Minus X\$18= X\$ 9= OR Minus Independent X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER **PRESENT** TIONAL TIONAL RATE RATE **AMENDMENT PREVIOUSLY AFTER EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$18= X\$ 9= OR Independent Minus X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL TOTAL OR ADDIT, FEE ADDIT, FEE (Column 3) (Column 1) (Column 2) HIGHEST CLAIMS ADDI-ADDI-NUMBER REMAINING **PRESENT RATE** TIONAL RATE TIONAL **PREVIOUSLY AFTER AMENDMENT EXTRA** AMENDMENT PAID FOR FEE FEE Total X\$ 9= X\$18= OR Independent Minus X39= X78= OR FIRST PRESENTATION MULTIPLE DEPENDENT CLAIM +130= +260= OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL OR \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT, FEE \*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number

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	PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2001  Application of Docket Number  09/52/,524											
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							L EI	NTITY	OR	OTHER SMALL	
TOTAL CLAIMS							RA	TE	FEE	]	RATE	FEE
FOR			NUMBER	FILED	NUMB	ER EXTRA	BASI	C FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	24 mi	ninus 20= * #		4	X\$	9=	36	OR	X\$18=	
INDEPENDENT CLAIMS			. 5 m	minus 3 = * 4			X4	2=	84	OR	X84=	
ΜU	LTIPLE DEPEN	IDENT CLAIM P	PRESENT				+14	···		1	+280=	
* If	the difference			.0 0	OR	TOTAL						
	C	TOTAL A O' OR TOTAL OTHER THAN										
1		(Column 1)	WILITOLI	(Colur	mn 2)	(Column 3)	SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	* //	Minus	# 2	4	=	X\$	9=		OR	X\$18=	
AME	Independent	* 6	Minus	*** <u>5</u>	5 01 4194	-	X4	2=		OR	X84=	
FIRST PRESENTATION OF M		JLTIPLE DEPENDENT CLAIM			+14	l0=.		OR	+280=			
perg						T ADDIT	OTAL FEE		OR	TOTAL ADDIT. FEE		
6		(Column 1)		(Colu		(Column 3)				_		
DMENT		, CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AMEN	Independent	*	Minus	***		=	X4	2=		OR	X84=	
L	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM		+14	n-			+280=	
	٠							OTAL		OR	TOTAL	
	H	5			-6	(a. )	ADDIT	FEE		OR	ADDIT. FEE	
7	//	(Column 1) CLAIMS		(Colur		(Column 3)			4001	ı I		455
AMENDMENT &		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RA	ΓΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	* ()	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X4:	2=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM			$\overline{}$			1200	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+14	U= OTAL		OR	+280= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEEOF								OR ,	ADDIT. FEE			
	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

Application or Docket Number	
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		CLAIMS AS	Golumn					SMALL ENTITY TYPE		OR	OTHER THAN	
TC	TAL CLAIMS						RA	ΤE	FEE	1 1	RATE	FEE
FOR			NUMBER	FILED	NUMB	ER EXTRA	BASIC	FEE	370.00	OR	BASIC FEE	740.00
ТС	TAL CHARGEA	BLE CLAIMS	mii	nus 20=	*		X\$	9=		OR	X\$18=	
INE	EPENDENT CL	_AIMS	m	ninus 3 = *			X42=			OR	X84=	
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				+14	0=		OR	+280=	
* If	the difference	in column 1 is	less than z	ero, ente	r "0" in c	column 2	TO	AL		OR	TOTAL	
	C	LAIMS AS A (Column 1)	MENDE	<b>D - PAR</b> (Colu		(Column 3)	SMA	ALL	ENTITY	OR	OTHER SMALL	
ENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST IBER OUSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	* 2	Minus	** (	59	=	X\$	9=		OR	X\$18=	
AME	Independent	* 2	Minus	***	6	=	X4:	2=		OR	X84=	
L	FIRST PRESE	ENTATION OF MI	ULTIPLE DE	PENDEN	CLAIM	<u> </u>	+14	0=.		OR	+280=	
	y						T( ADDIT.	)TAL FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RA <sup>-</sup>	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***	E OL AINA	=	X42	2=		OR	X84=	
	FIRST PRESE	NTATION OF MU	JLIIPLE DEI	PENDENT	CLAIM		+14	0=		OR	+280=	
							TO ADDIT.	TAL			TOTAL ADDIT. FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)	ADDII.	ree i			ADDIT. FEET	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NON	Total	*	Minus	**		=	X\$ 9	9=		OR	X\$18=	
AME	Independent	*	Minus	***	- 01 1111	=	X42	= 7		OR	X84=	
L	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENT	CLAIM		.44	$\Box$			1200	
		mn 1 is less than the mber Previously Pa					+140 TC ADDIT.	TAL		OR OR	+280= TOTAL ADDIT, FEE	
***	If the "Highest Nu	mber Previously Pa	aid For" IN TH	IS SPACE	is less tha	n 3, enter "3."			ropriato ho			

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

# NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION	NUMBER:					
_		Total Fe	e Calculation	a	·	
	Fee Code	Total # Claims	Number Extra X	Fee	Fcc	Total
	Sm./Lg.			Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101				494	· 1098
Total Claims >20	203/103	25 -20	. <u> </u>		<b>63</b>	- 90
Independent Claims >3	202/102	5 .1.	<u> 3</u> x		18	156
Mult. Dep Claim Present	204/104					
Surcharge	205/105				<u> </u>	/30
English Translation	130				232	
TOTAL FEE CALCULA	ATION					1066
Fees due upon filing th	ne application.					
Total Filing Fees Due	= 5	100	66			
Less Filing Fees Subm.	iπed - \$		<del></del>			
BALANCE DUE	= S	100	6			
Office of Initial Patent I	Hague Examination				·•	
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